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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">For FY 2005</h3>		Complete if Known	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/563,047
		Filing Date	July 2, 2004
		First Named Inventor	Lucille Beaudet
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
TOTAL AMOUNT OF PAYMENT (\$)		Attorney Docket No.	NEN-22402/16

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>07-1180</u> Deposit Account Name: <u>Gifford, Krass, Groh, Sprinkle, Anderson &</u>	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)	
<input type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments	

FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES		SEARCH FEES		EXAMINATION FEES			
<u>Application Type</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	<u>Fees Paid (\$)</u>	
Utility	300	150	500	250	200	100	_____	
Design	200	100	100	50	130	65	_____	
Plant	200	100	300	150	160	80	_____	
Reissue	300	150	500	250	600	300	_____	
Provisional	200	100	0	0	0	0	_____	
							Small Entity	
							Fee (\$)	
2. EXCESS CLAIM FEES							Fee (\$)	
Fee Description							Fee (\$)	
Each claim over 20 (including Reissues)							50	
Each independent claim over 3 (including Reissues)							200	
Multiple dependent claims							360	
							180	
Total Claims Extra Claims Fee (\$) Fee Paid (\$)							Multiple Dependent Claims	
- 20 = _____ x _____ = _____							Fee (\$) Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)								
- 3 = _____ x _____ = _____								
HP = highest number of independent claims paid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
<u>Total Sheets</u>		<u>Extra Sheets</u>		<u>Number of each additional 50 or fraction thereof</u>		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	
_____ - 100 = _____		/50		_____ (round up to a whole number) x _____		_____	_____	
							Fees Paid (\$)	
4. OTHER FEE(S)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): _____								

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	31,005
Name (Print/Type)	Ronald W. Citkowski	Telephone	(248) 647-6000
		Date	September 18, 2006

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